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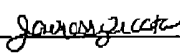
April 12, 2004

**GROUP: 1635****FAX NUMBER: 1-703-872-9306****ATTORNEY DOCKET NO.: RTS-0147****SERIAL NO.: 09/828,344****FILED: April 5, 2001****NUMBER OF PAGES: 12**  
(including this sheet)**MESSAGE:** Attached is a Attached is an Amendment Transmittal Letter (in duplicate) and  
Response to Office Action dated January 16, 2004.**URGENT! PLEASE DELIVER IMMEDIATELY UPON RECEIPT. THANK YOU!**

\* \* \* \* \*

If you have any questions, or did not receive the proper number of pages, or had trouble  
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<b>AMENDMENT TRANSMITTAL LETTER (Large Entity)</b>			Docket No. <b>RTS-0147</b>
Applicant(s): <b>Bennett and Wyatt</b>			
Serial No. <b>09/828,344</b>	Filing Date <b>April 5, 2001</b>	Examiner <b>James Schultz</b>	Group Art Unit <b>1635</b>
Invention: <b>ANTISENSE MODULATION OF PHOSPHOLIPID SCRAMBLASE 1 EXPRESSION</b>			
<u>TO THE COMMISSIONER FOR PATENTS:</u>			
Transmitted herewith is an amendment in the above-identified application. The fee has been calculated and is transmitted as shown below.			
<b>CLAIMS AS AMENDED</b>			
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT
TOTAL CLAIMS	13 -	20 =	0 x
INDEP. CLAIMS	1 -	3 =	0 x
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>			\$0.00
<b>TOTAL ADDITIONAL FEE FOR THIS AMENDMENT</b>			<b>\$0.00</b>
 <input checked="" type="checkbox"/> No additional fee is required for amendment. <input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of _____ <input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed. <input checked="" type="checkbox"/> The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. <b>50-1619</b> <input checked="" type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16. <input checked="" type="checkbox"/> Any patent application processing fees under 37 CFR 1.17.			
<div style="text-align: center;"> _____ Signature</div> <p><b>Jane Massey Licata</b> Reg. No. 32,257 Licata &amp; Tyrrell P.C. 66 E. Main Street Marlton, NJ 08053 Tel: 856-810-1515 Fax: 856-810-1454</p>		Dated: <b>April 12, 2004</b>	
CC:		<div style="border-bottom: 1px solid black; margin-bottom: 5px;">I certify that this document and fee is being deposited on _____ with the U.S. Postal Service as first class mail under 37C.F.R. 1.8 and is addressed to the for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.</div> <div style="border-bottom: 1px solid black; margin-bottom: 5px; text-align: center;">Signature of Person Mailing Correspondence</div> <div style="border-bottom: 1px solid black; margin-bottom: 5px; text-align: center;">Typed or Printed Name of Person Mailing Correspondence</div>	

P11LARGE/REV08

<b>AMENDMENT TRANSMITTAL LETTER (Large Entity)</b>				Docket No. <b>RTS-0147</b>	
Applicant(s): <b>Bennett and Wyatt</b>					
Serial No. <b>09/828,344</b>	Filing Date <b>April 5, 2001</b>	Examiner <b>James Schultz</b>	Group Art Unit <b>1635</b>		
Invention: <b>ANTISENSE MODULATION OF PHOSPHOLIPID SCRAMBLASE 1 EXPRESSION</b>					
<u>TO THE COMMISSIONER FOR PATENTS:</u>					
Transmitted herewith is an amendment in the above-identified application. The fee has been calculated and is transmitted as shown below.					
<b>CLAIMS AS AMENDED</b>					
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE
TOTAL CLAIMS	13 -	20 =	0 x	\$18.00	\$0.00
INDEP. CLAIMS	1 -	3 =	0 x	\$86.00	\$0.00
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00
<b>TOTAL ADDITIONAL FEE FOR THIS AMENDMENT</b>					<b>\$0.00</b>
 <input checked="" type="checkbox"/> No additional fee is required for amendment. <input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of _____. <input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed. <input checked="" type="checkbox"/> The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. <b>50-1619</b> <input checked="" type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16. <input checked="" type="checkbox"/> Any patent application processing fees under 37 CFR 1.17.					
_____ <i>Jane Massey Licata</i> Signature			Dated: <b>April 12, 2004</b>		
Jane Massey Licata Reg. No. 32,257 Licata & Tyrrell P.C. 66 E. Main Street Marlton, NJ 08053 Tel: 856-810-1515 Fax: 856-810-1454			<div style="border: 1px solid black; padding: 5px;"><p>I certify that this document and fee is being deposited on _____ with the U.S. Postal Service as first class mail under 37C.F.R. 1.8 and is addressed to the for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.</p><p style="text-align: center;">_____ Signature of Person Mailing Correspondence</p><p style="text-align: center;">_____ Typed or Printed Name of Person Mailing Correspondence</p></div>		
CC:					

P11LARGE/REV06

<b>CERTIFICATE OF TRANSMISSION BY FACSIMILE (37 CFR 1.8)</b>			Docket No. <b>RTS-0147</b>
Applicant(s): <b>Bennett and Wyatt</b>			
Serial No. <b>09/828,344</b>	Filing Date <b>April 5, 2001</b>	Examiner <b>James Schultz</b>	Group Art Unit <b>1635</b>
Invention: <b>ANTI-SENSE MODULATION OF PHOSPHOLIPID SCRAMBLASE I EXPRESSION</b>			
<p>I hereby certify that this <u>Reply under 37 C.F.R. 1.111</u> (Identify type of correspondence) is being facsimile transmitted to the United States Patent and Trademark Office (Fax. No. <u>703-872-9306</u>) on <u>April 12, 2004</u> (Date)</p> <p><u>Jane Massey Licata</u> (Typed or Printed Name of Person Signing Certificate)</p> <p><u>Jane Massey Licata</u> (Signature)</p> <p><b>Note: Each paper must have its own certificate of mailing.</b></p>			

P18/REV01

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## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Attorney Docket No.: RTS-0147  
Inventors: Bennett and Wyatt  
Serial No.: 09/828,344  
Filing Date: April 5, 2001  
Examiner: James Schultz  
Group Art Unit: 1635  
Title: Antisense Modulation of Phospholipid  
Scramblase 1 Expression

## Certificate of Facsimile Transmission

I hereby certify that this paper is being facsimile  
transmitted to the Patent and Trademark Office on  
the date shown below.

On April 12, 2004

*Jane Massey*  
Jane Massey Licata Registration No. 32,257

Commissioner for Patents  
Washington, D.C. 20231

Dear Sir:

Reply under 37 C.F.R. § 1.111

This is a reply to the Office Action mailed January 16, 2004  
setting a three (3) month statutory period for response. Please  
enter the following amendments and remarks into the record.

The Amendments to the Claims are reflected in the listing of  
claims which begins on page 2.

Remarks begin on page 5.